

**STATE OF CONNECTICUT
DEPARTMENT OF REVENUE SERVICES
25 SIGOURNEY STREET
HARTFORD, CT 06106**



An Affirmative Action/Equal Employment Opportunity Employer

1. Answer all questions carefully and completely. **Type or print in ink. You must fill out this application completely even if a resume is being attached. IF THIS APPLICATION IS NOT COMPLETED IN FULL, WE CANNOT CONSIDER YOU FOR AN INTERVIEW.** All information you provide to us will allow us to screen your application more efficiently and determine your qualifications for the position for which you are applying.
2. If you are contacted for an interview, you will be expected to provide DRS with letters of reference from previous employers and/or personal references including names, addresses and phone numbers.
3. Completely fill in the employment history portion with company names and addresses, supervisor names and phone numbers and the dates of your employment.
4. Return all documents to Human Resources at the above address.
5. Attach additional sheets as required.
6. **Misstatements of any kind may invalidate your application and any subsequent appointment.**

| | | | | |
|----------------|----------------|--------------|----------------|------------------------|
| NAME | Last | First | Middle Initial | Date |
| ADDRESS | No. and Street | City or Town | State | Zip Code |
| | | | | Social Security Number |

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|----------------------------|------------------------|
| Business Telephone Number: | Home Telephone Number: |
|----------------------------|------------------------|

PLEASE STATE POSITION(S) FOR WHICH YOU ARE APPLYING: _____

| | | | | |
|---|------------------------------------|------------------------------------|------------------------------------|------------------------------|
| Check Appropriate Box: | <input type="checkbox"/> Full Time | <input type="checkbox"/> Part Time | <input type="checkbox"/> Temporary | |
| Are you presently employed by the State of Connecticut? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | If "yes" your Class Title _____ | |
| Were you ever employed by the State of Connecticut? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | If "yes" when and where _____ | |
| Have you used other names in previous jobs? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | If "yes," specify _____ | |
| Can you travel if the job requires it? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | | |
| Are you under the age of 17? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | | |
| Do you have any valid licenses or certificates which authorize you to practice a profession or a trade? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Kind _____ Date _____ | Issued by _____ No. _____ |

PROVIDE A DESCRIPTION OF VOLUNTEER EXPERIENCE THAT WOULD BE OF PARTICULAR VALUE IN THE POSITION FOR WHICH YOU ARE APPLYING: _____

Indicate skills you have by checking all appropriate below:

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| <input type="checkbox"/> Calculator/10 key adding machine <input type="checkbox"/> Spreadsheets, Excel, Lotus <input type="checkbox"/> Word Processing <input type="checkbox"/> Shorthand/Speedwriting WPM _____ <input type="checkbox"/> Office Machines _____ <input type="checkbox"/> Typing WPM _____ | <input type="checkbox"/> Personal Computer <input type="checkbox"/> Graphic Arts Equipment <input type="checkbox"/> Computer Operations (mainframe) <input type="checkbox"/> Foreign Language(s) (This information is voluntary) <input type="checkbox"/> _____ speak fluently <input type="checkbox"/> _____ write fluently <input type="checkbox"/> _____ 2-4 yrs. College courses <input type="checkbox"/> _____ 2-4 yrs. High School courses | <input type="checkbox"/> Encoder <input type="checkbox"/> Keypunch S/HR _____ <input type="checkbox"/> Data Entry S/HR _____ <input type="checkbox"/> Proficient in the following Software Applications _____ _____ _____ |
|--|--|--|

| | NAME AND LOCATION (City and State) | DATES Month & Year | CIRCLE HIGHEST GRADE COMPLETED | DID YOU GRADUATE | IF NO, NUMBER OF YEARS | CREDIT HOURS EARNED | DEGREE RECEIVED | MAJOR COURSE OF STUDY |
|--|---------------------------------------|-----------------------|---|------------------------|------------------------------|---------------------------|--------------------|-----------------------------|
| High School | | From: To: | 1 2 3 4 | Y N | | | | |
| College, University, or Professional School | | From: To: | 1 2 3 4 | Y N | | | | |
| Technical or Business School | | From: To: | 1 2 3 4 | Y N | | | | |
| Other Schools or Courses | | From: To: | 1 2 3 4 | Y N | | | | |

EMPLOYMENT RECORD (Present or most recent first)

| | | | | | |
|---|---------|--------------------------|--|------------------------|--|
| Name of Employer: | | Address: | | Telephone Number: | |
| Name and Title of Supervisor: | | Employed from: (Mo./Yr.) | | Employed to: (Mo./Yr.) | |
| Your Job Title: | Salary: | Hours per week: | | Reason For Leaving: | |
| Description of Duties and Responsibilities: | | | | | |
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| Your Job Title: | Salary: | Hours per week: | | Reason For Leaving: | |
| Description of Duties and Responsibilities: | | | | | |
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| Name and Title of Supervisor: | | Employed from: (Mo./Yr.) | | Employed to: (Mo./Yr.) | |
| Your Job Title: | Salary: | Hours per week: | | Reason For Leaving: | |
| Description of Duties and Responsibilities: | | | | | |
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| Your Job Title: | Salary: | Hours per week: | | Reason For Leaving: | |
| Description of Duties and Responsibilities: | | | | | |
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TO REQUEST AN ACCOMMODATION

Qualified individuals with a disability may request an accommodation in the application process and/or during the interview under the provisions of the Americans with Disabilities Act (ADA) by contacting Penny Potter, ADA Coordinator at the Office of Diversity and Equity at 860-297-5708. Please provide the title of the position for which you applied, your social security number, and a description of your specific needs.

I hereby release my former employers from any and all claims which arise in any way from this information. I understand that this information will be reviewed to determine my eligibility for the position(s). I also understand that any misleading or incorrect information, misrepresentation, or omission of employers may render my application for employment or transfer void, or may result in my disqualification or immediate dismissal whenever discovered.

I certify that I am the person named in this application and that all information contained herein is true, complete and correct to the best of my knowledge and belief. I understand that incomplete or false statements may result in my disqualification for the position(s) applied for or immediate dismissal whenever discovered.

Signed (Applicant) _____ Date _____

ANSWERS TO THE FOLLOWING QUESTION WILL BE CONSIDERED FOR EMPLOYMENT PURPOSES ONLY IF RELEVANT TO THE POSITION FOR WHICH YOU ARE APPLYING.

Have you ever been CONVICTED of an offense against civil or military law, or are there criminal charges currently pending against you?
(Exclude minor traffic violations or any offenses settled in Juvenile Court or under a youth offender law.)

☐ Yes ☐ No

If "YES," please attach a detailed explanation about the nature of the conviction, degree of rehabilitation and time since release.

Special Note: You are not required to disclose the existence of any arrest, criminal charge or conviction, the records of which have been erased pursuant to Connecticut General Statutes § 46b-146, 54-76o, or 54-142a. If your criminal records have been erased pursuant to one of these statutes, you may swear under oath that you have never been arrested. Criminal records that may be erased are records pertaining to a finding of delinquency or that a child was a member of a family with service needs (C.G.S. § 46b-146), an adjudication as a youthful offender (C.G.S. § 54-76o), a criminal charge that has been dismissed or nolle, a criminal charge for which the person has been found not guilty or a conviction for which the person received an absolute pardon (C.G.S. § 54-142a).

I certify that I am the person named in this application and that all information contained herein is true, complete and correct to the best of my knowledge and belief. I understand that incomplete or false statements may result in my disqualification for the position(s) applied for or immediate dismissal whenever discovered.

Signed (Applicant) _____

Date _____

APPLICANT DATA SHEET

Last Name: _____ First Name: _____ M.I.: _____

Position(s) for which you are applying: _____

Social Security Number: _____ - _____ - _____

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SECTION I: MANDATORY

Are you a veteran? ☐ yes ☐ no

Have you ever been CONVICTED of an offense against civil or military law, or are there criminal charges currently pending against you? (Exclude minor traffic violations or any offenses settled in Juvenile Court or under a youth offender law.)

☐ Yes ☐ No If "YES," please attach a detailed explanation about the nature of the conviction, degree of rehabilitation and time since release.

Special Note: You are **not** required to disclose the existence of any arrest, criminal charge or conviction, the records of which have been erased pursuant to Connecticut General Statutes § 46b-146, 54-76o, or 54-142a. If your criminal records have been erased pursuant to one of these statutes, you may swear under oath that you have never been arrested. Criminal records that may be erased are records pertaining to a finding of delinquency or that a child was a member of a family with service needs (C.G.S. § 46b-146), an adjudication as a youthful offender (C.G.S. § 54-76o), a criminal charge that has been dismissed or nolle, a criminal charge for which the person has been found not guilty or a conviction for which the person received an absolute pardon (C.G.S. § 54-142a).

SECTION II: VOLUNTARY

In order to meet State and Federal reporting requirements, we are requesting that you voluntarily supply the following information. This data will not be considered in the evaluation of your application.

Sex: ☐ Female ☐ Male

Race/Ethnic data:

- ☐ Black: Not of Hispanic Origin – persons having origins in any of the black racial groups of Africa
- ☐ Hispanic: - Persons of Mexican, Puerto Rican, Central or South American or other Spanish culture or origin, regardless of race.
- ☐ White: Not of Hispanic Origin – Persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.
- ☐ American Indian or Alaskan Native: - Persons having origins in any of the original peoples of North America and who maintain cultural identification through tribal affiliation or community recognition.
- ☐ Asian or Pacific Islander: - Persons having origins in any of the original peoples of the Far East, Southeast Asia, Indian Subcontinent or the Pacific Islands. This area includes, for example, China, Japan, Korea, Philippine Islands and Samoa.

Primary Source of Job Information: Where did you learn about this employment opportunity?

- ☐ Internet
- ☐ Job Service Office
- ☐ An announcement/job posting
- ☐ Community organization (specify) _____
- ☐ Career Fair (Specify) _____
- ☐ A present State Employee (name) _____
- ☐ A Department of Revenue Services employee (name) _____
- ☐ Ad placed in a newspaper
- ☐ Other. Please specify _____

Signed (Applicant) _____

Date _____

Your signature is required on both the Applicant Data Sheet and the Application.